

**DECLARATION FOR UTILITY APPLICATION USING AN APPLICATION
DATA SHEET (37 C.F.R. § 1.76) AND POWER OF ATTORNEY**

Application of: Fischer et al.

Attorney Docket No.: PZ010P2

Application Serial No.: Unassigned

Art Unit: Unassigned

Filed: Herewith

Examiner: Unassigned

Title: 123 Human Secreted Proteins

As a below named inventor, I hereby declare that:

This declaration is directed to:

- ☒ The attached application, or
☐ Application No. _____, filed on _____,
☐ as amended on _____ (if applicable);

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought;

I have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;

I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in 37 C.F.R. § 1.56; and

All statements made herein of my own knowledge are true, all statements made herein on information and belief are believed to be true, and these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001, and may jeopardize the validity of the application or any patent issued thereon.

I hereby appoint the Practitioners at **Customer Number 22195** as my attorney(s) or agent(s) with full power of substitution, association, and revocation to prosecute the application identified above, including any continuation or divisional applications, and to transact all business in the U.S. Patent and Trademark Office connected therewith. Direct all correspondence to the above-mentioned Customer Number, namely **22195**.

FULL NAME(S) OF INVENTOR(S):

Inventor One: Carrie L. Fischer Citizen of: USA

Signature: _____ Date: _____

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Signature: _____ Date: _____

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Signature: _____ Date: _____

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